District I Form C-102 State of New Mexico 1625 N French Dr , Hobbs NM Phone (575) 393-6161 Fa Revised August 1, 2011 Energy, Minerals & Natural Resources Department Phone (575) 748-1283 Fax (575) 748-9720 **2 5** 2012 Submit one copy to appropriate OIL CONSERVATION DIVISION District Office District III 1220 South St. Francis Dr. 1000 Rio Brazos Road, Azte RYDRA OCD ARTESIA Phone (505) 334-6178 Fax (305) 534-6170 ☐ AMENDED REPORT Santa Fe, NM 87505 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505 Phone. (505) 476-3460 Fax (505) 476-3462 WELL LOCATION AND ACREAGE DEDICATION PLAT 30-015- 25828 Pool Code Pool Name Dodd-Glorieta-Upper Yeso 97917 Property Code Property Name Well Number 308195 Dodd Federal Unit ⁷OGRID No. 229137 Operator Name Elevation COG Operating LLC Surface Location Lot Ida UL or lot no. Feet from the East/West line Section Township Range North/South line Feet from the County 33b 29E Eddy 17S East 7.07.D sout-n " Bottom Hole Location If Different From Surface UL or lot no. Section Township Range Lot Idn Feet from the North/South line Feet from the East/West line County 12 Dedicated Acres ³ Joint or Infill 4 Consolidation Code Order No. R-10067-E 40 No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division. "OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division 6/08/12 Kanicia Castillo Printed Name kcastillo@concho.com *SURVEYOR CERTIFICATION I hereby certify that the well location shown on this *3*30' plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief

Date of Survey

Certificate Number

Signature and Seal of Professional Surveyor